

MODERNIZING MEDICAID FREQUENTLY ASKED QUESTIONS

Question	Answer
<p>1. How will the changes in the Idaho Medicaid program affect me and my family?</p>	<p>Idaho Medicaid's focus is on wellness, prevention, and responsibility. If you are new to Medicaid as of July 1, 2006, you and your family will be enrolled in one of two benefit plans depending on your health needs. If you are already a Medicaid participant, you will be enrolled in one of the plans at your renewal date. You don't have to do anything.</p> <p>The two plans are:</p> <ol style="list-style-type: none"> 1. The Medicaid Basic Plan is for low-income children and adults with eligible dependent children. This plan provides complete health, prevention, and wellness benefits for children and adults who don't have special health needs. Most Medicaid and CHIP participants will have coverage in this benefit plan. 2. The Medicaid Enhanced Plan is for individuals with disabilities or special health needs. This plan includes all benefits covered in the Basic Plan, plus additional benefits.
<p>2. My children are on CHIP-B. Will there be any changes to the CHIP B program?</p>	<p>Yes, CHIP-B benefits will change. As of July 1, 2006, children on CHIP-B will be enrolled in the Medicaid Basic Plan. You will get a letter informing you of your children's coverage.</p>
<p>3. Will my child's CHIP-B card still work?</p>	<p>All children enrolled in CHIP-B will get a new, white Medicaid card after they are automatically converted to a new plan on July 1. You can use the yellow CHIP-B card until the white replacement card arrives in the mail.</p>

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4. What is a “special health need?”	A special health need is a need for more services or services not covered in the Medicaid Basic Plan. Your doctor will help decide if you have a special health need. Examples of special health needs include a need for treatment for a serious mental illness or a need for long-term care.
5. Do I have to do anything if I am currently on a Medicaid plan?	No, processes are set up to make sure we move you to the correct plan at your renewal date. At your renewal, you will receive a notification letter. You don’t need to call your case worker at this time.
6. Will being in a new Medicaid plan cut my benefits?	<p>No, in fact some participants may be eligible for additional services</p> <p>Most people will have all their health needs met with the Medicaid Basic Plan. If you need additional health services beyond those included in Medicaid Basic Plan, such as a serious mental illness or the need for long-term care, you may be eligible for the Enhanced Plan. Your doctor will help decide whether you have special health needs.</p>
7. Are there any changes in eligibility?	For adults there are no changes. For children there is no longer an asset limit. Assets are cash or items with cash value, such as money in a savings account or an investment. These items will not count against a child’s eligibility. The adult asset limit is still \$1,000. The best way to find out if you or your child is eligible is to fill out an application.
8. Who do I call for questions?	Call the Idaho CareLine at 2-1-1 or 1-800-926-2588.
9. Can I enroll on-line? How do I enroll in one of the new Medicaid plans?	No, you can’t enroll on-line. However, you can print an application for assistance at http://www.healthandwelfare.idaho.gov/Rainbow/Documents/app_benefits.pdf and send the completed application to the address listed on page 1 of the application.

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10. I don't currently receive Medicaid. How do I apply?	Medicaid now has a single office to help you apply called Family Medicaid. Call Family Medicaid (toll free) at 1-866-326-2485 to ask for an application. You can also call the Idaho CareLine at 2-1-1 or 1-800-926-2588 to find out how to get an application from your local Department of Health and Welfare (DHW) office. You must complete an application and drop it off, send it, or fax it to 1-208-528-5980 Family Medicaid or your local DHW office.
11. Are there any prevention services in the new plans?	Your child's prevention services include well-child checks, dental check-ups, and immunizations. Adults will receive an annual wellness exam.
12. Are dental services covered?	Yes, dental services are included in all plans.
13. How will Medicaid change for children and adults without a disability or a special health need?	People without a disability or a special health need will be in the Medicaid Basic Plan. Some of the services include annual adult wellness check-ups, physical therapy, chiropractic services, home health services, durable medical equipment, and dental services. Mental health services are more limited in the Medicaid Basic Plan. If you need additional services then your doctor can assess your needs for possible placement in the Medicaid Enhanced Plan.
15. How will Medicaid change for people with a disability or a special health need?	People with a disability or a special health need enrolled in the Medicaid Enhanced Plan will have the same benefits they receive now. The Medicaid Enhanced Plan includes all services of the Medicaid Basic Plan, plus additional services to cover the needs of participants with disabilities or special health needs.

Question	Answer
16. How will Medicaid change for persons age 65 and older?	<p>Medicaid participants who are age 65 and older must enroll in Medicare (everyone 65 and older is eligible for Medicare). Medicaid participants age 65 and older will be enrolled in the Medicaid Enhanced Plan. Starting in fall 2006, people enrolled in both programs may be eligible for coordinated benefits through Medicare Advantage Plans.</p>